COUNTY OF SAN DIEGO

PESTICIDE USE MONITORING INSPECTION

DEPARTMENT OF AGRICULTURE, WEIGHTS AND MEASURES PESTICIDE REGULATION PROGRAM PAGE OF

									Г	AGE	_ 0		-	
FIRMPERSON INSPECTED						ISOR		PCA RECOMMENDATIO		WIND VELOCITY/				
FIRM ADDRESS						DNE		PERMIT/OPERATOR ID		DIRECTION TO COMMODITY/SITE				
IF PCO APPLIED, NAME OF BUSINESS						S TYPE	NII	MBER	FOLII	EQUIPMENT USED:				
WHERE APPLIED; NAME OF BUSINESS WHERE APPLIED: PROPERTY LOCATION/SITE NO						ty Operator (g	rower, govt agend ss (agricultural, ga	cy)	2001	WEIVI O	JLD.			
					[] Agricul	ontrol Busines Itural Production	ss (agricultural, ga on [] Non Pr	roduction						
ADJACENT ENVIRO (N)	ONMENT (S))					RT						
HANDLER		ACTIVITY	(E)		,	ERSONAL	PROTECTIVE	EQUIPMENT (PPE)						
# OF HANDLE	RS	ACTIVITY	PROVIDED/WORN						Label PPE REQ'D, NOT WORN					
		App M/L Other:	Coveralls P W Eyev	vear PW Gloves	SPW Re	sp P W Oth	ner: P W							
		App M/L Other:		vear PW Gloves		•								
		App M/L Other:	Coveralls P W Eyev											
		App M/L Other: App M/L Other:	Coveralls P.W. Eyev			sp P W Oth								
PESTICIDE NAME/MANUFACTURER			Coveralls P W Eyewear P W Gloves P W Resp P W Other: P W LABEL REGISTRATION NUMBER SIGNAL WORD FORMULATION							RATE	DILL	JTION	Т	REI
	CIDE NAME/MAN	NUFACTURER	LADEL REGIS					F L WP		KAIL	DILU	HON	-	KEI
<u>1.</u> 2.							rning Caution rning Caution	F L WP					-	
3.				Danger Wa				F L WP					+	
4.					Ü	rning Caution	F L WP							
5.					rning Caution	F L WP								
A. APPLICAT	ION INSPEC	TION	B. N	MIX AND LOA	AD INSP	ECTION	C. EQUIP	MENT INSPECTIO	N				•	
COMPLIANCE	1			Reference		IPLIANCE				Refe	erence	CC	OMPLIA	NCF
Yes No NA		REQUIREMENTS	•	Section	Yes	No NA		REQUIREMENTS		Se	ction	Yes	No	NA
		s with Permit Conditions - Site/Rate/Other*		12973 12973			Equipmen Equipmen				732 530			
	3a. Labeling			12973				t Safe to Operate			00(a)			
	b. Labeling - Eyewear*			12973			Backflow Prevention Airgap				510			
	b. Labeling- Gloves*			12973			Provide	00	,10					
	c. Labeling - Respirator* d. Labeling - Other:*			12973 12973			Safe Equipment 5. Proper Tank Cover				742			
	Restricted Material Use Supervised			6406			6. Shut Off Device/Sight Gauge-Cat I, II 6742							
	5. Notice of Intent Submitted			6434			7. Service Containers Labeled 6678							
		ntrol/Phenoxy Herbicides Methods/Manner/Climate	6460,64 6600	+		8. Container Transportation 6682							-	
	Accurate Measurement			6604			Are Handlers employees? [] Yes [] No How do you know?							
	10. Protection	6614			*Write Label Requirements in Remarks.									
	11. Container	6670 6684	+ +		REPORTS									
	13. Handlers	6724			Follow-up Required				[]Yes []No					
	14. Medical C		6726							[] Tes [] NO				
	15. Employe 16. Deconta	6730 6734(a,b)	+		Cease & Desist Order Issued Food & Ag Code 11897 13102				[] Yes [] No					
	Cove	0734(a,b)						, 1 N , , , , , , 1 N , ,						
	Decontar	6734(a,d)			Stop Work Order Food & Ag Code 117			[]Yes []No						
		n Immediately Available (F s, Signal Word Danger or		6734(c) 6736										
		ns-PPE provided	6738(a)	For any N				narked u	nder "Co	ompliar	ices"	, this		
	b. Regulations-Eyewear			6738(b)		inspec				erves as	а			
	c. Regulati			6738(c)				Violat	ion N	lotic	e			
	d. Regulation-Footwear e. Regulation-Headgear			6738(d) 6738(e)			I Muct b			lator	than			
	f. Regulation- Apron			6738(f)	1		[] Must be corrected before next applic						шап	
	g. Regulation-Chemical Resistant Suit			6738(g)			[] Contact Inspector					at		
	h. Regulation-Respiratory Protection 20. Closed System – Meets Criteria			6738(h)	-		for reinspection before above da					late.		
	20. Closed S	6746 6776			_									
	22a.PCB Lice	nsed / Work for Hire	11701 11732		Noncompliances corrected at time of inspection									
b. PCB Registered in County]							
Demonia							<u> </u>							
REMARKS:														
INSPECTOR'S SIGN	NATURE								DATE IN	SPECTED				
INSPECTION ACKN							NUMBER DATE							
PRINT SIGNATURE							TITLE ACKNOWLEDGED							
AWM 221 (5/98)		ORIGINAL - COUNTY	FIRS	ST COPY- PERSON	J/FIRM INSP	FCTFD	SECON	ID COPY-INSPECTOR						